EXHIBIT D



COMMERCIAL ARBITRATION RULES DEMAND FOR ARBITRATION

Mediation: If you would like the AAA to contact the other parties. There is no additional administrative fee for this service.	and attempt to arrange a mediation	on, please check this box 🗖.	
You are hereby notified that a copy of our arbitration agreement at Association with a request that it commence administration of the an answering statement.			
Name of Respondent: DDD, Inc.			
Address: 40303 Northshore Drive			
City: Loon Lake	State: Washington	Zip Code: 99148-9755	
Phone No.:	Fax No.:		
Email Address:			
Name of Representative (if known): Michael R. Merritt			
Name of Firm (if applicable): hawley Troxell Ennis & Hawley, LLC			
Representative's Address: 422 W Riverside Ave, Suite 1100			
City: Spokane	State: Washington	Zip Code: 99201	
Phone No.: 509.624.5265	Fax No.:		
Email Address: MMerritt@hawleytroxell.com			
The named claimant, a party to an arbitration agreement which provides for arbitration under the Commercial Arbitration Rules of the American Arbitration Association, hereby demands arbitration.			
Brief Description of the Dispute:			
Claimant is in the business of providing cryptocurrency kiosks, and Claimant entered into two agreements with Respondent to place Kiosks at two premises that Respondent either owned or operated. Claimant performed all contractual obligations but Respondent breached these contracts when it unplugged Claimant's kiosks and rendered them inoperable.			
Dollar Amount of Claim: \$ 437,200			
Other Relief Sought: 🗹 Attorneys Fees 🗆 Interest 🗹 Arbitration Costs 🗆 Punitive/Exemplary			
Amount enclosed: \$ 2,200			
In accordance with Fee Schedule: 🗹 Flexible Fee Schedule 🗆 Standard Fee Schedule			
Please describe the qualifications you seek for arbitrator(s) to be appointed to hear this dispute:			
Commercial litigation experience			
Hearing locale: Atlanta, GA			
(check one) ☐ Requested by Claimant Locale provision included in the contract			



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Estimated time needed for hearings overall:	hours or 1	days	
Type of Business:			
Claimant: Cryptocurrency Kiosks/ATMs	Respondent: Convenience Store		
Are any parties to this arbitration, or their controlling shareholder or parent company, from different countries than each other?			
No			
Signature (may be signed by a representative):	Date:		
David F. Ellison	2/7/23		
Name of Claimant: Lux Vending, LLC			
Address (to be used in connection with this case): 3343 Peachtree Rd NE, Suite 750			
City: Atlanta	State: Georgia	Zip Code: 30326	
Phone No.:	Fax No.:		
Email Address:			
Name of Representative: David F Ellison			
Name of Firm (if applicable): Fortson Bentley & Griffin PA			
Representative's Address: 2500 Daniell's Bridge Road, Bldg 200, Suite 3A			
City: Athens	State: Georgia	Zip Code: 30606	
Phone No.: 706.548.1151	Fax No.: 706.559.0181		
Email Address: dfe@fbglaw.com			
To begin proceedings, please file online at <u>www.adr.org/fileonline</u> . You will need to upload a copy of this Demand and the Arbitration Agreement, and pay the appropriate fee.			